NOTICE OF FEEDUE

DATE	12-02-00	+					
TO	12-02-00 Jssu Je	L					
FROM	Office of Initial Pate	ent Examination					
SUBJECT	Fee Due						
APPLICATION	NUMBER <u>095</u>	549.445					
Office for the fauthorization to	the attached docume ollowing reason. Ple ocharge a deposit acc of lf an authorization	ase check the appl count. If an author	ication ization	for the approis present, p	opriate lease charg		
Insufficient	fee by- <u>sheck-</u> <i>Crcel</i>	it card.					
Insufficient f	funds in deposit amoun	t					
Declined cree	dit card						
Non-authoriz	ation for charge to depo	osit account					
No fee submit	tted per requirement						
The correct fee cod	le:	amo	unt	\$			
The suspended fee	code: 1999	amo	ınt	\$			
Fee Due		amou	ınt	=\$		· · · .	
If you have any que Eleanor Kurtz 703-3	stions, please contact (308-3642	Cynthia Streater at 70	03-306-	5430 or			
Torminal Organia				,	•		